| Application | or | Docket | N | umbei |
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## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

| CLAIMS AS FILED - PART I  |                                       |                                 |              | C A                           | ADII EN      | ITITY            |                   | OTHER          | THAN                   |                               |                |                        |
|---|---------------------------------------|---------------------------------|--------------|-------------------------------|--------------|------------------|-------------------|----------------|------------------------|-------------------------------|----------------|------------------------|
|   |                                       | (Column 1)                      |              | (Column 2)                    |              |                  | SMALL ENTITY TYPE |                | OR                     | OTHER THAN<br>OR SMALL ENTITY |                |                        |
| TOTAL CLAIMS 33   |                                       |                                 |              |                               | RATE         | FEE              |                   | RATE           | FEE                    |                               |                |                        |
| FO  | FOR NUMBER FILED                      |                                 | NUMBER EXTRA |                               | В            | ASIC FEE         | 375.00            | OR             | BASIC FEE              | 750.00                        |                |                        |
| TOTAL CHARGEABLE CLAIMS 25 minus 20=  |                                       |                                 | * (3         | ,                             |              | X\$ 9=           | 117               | OR             | X\$18=                 |                               |                |                        |
| INDEPENDENT CLAIMS 3 =  |                                       |                                 | * ∂          |                               |              | X42=             |                   | OR             | X84=                   |                               |                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                                       |                                 |              |                               |              |                  |                   | +140=          |                        | OR                            | +280=          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                                       |                                 |              |                               | olumn 2      | _                | TOTAL             | 497            | OR                     | TOTAL                         |                |                        |
| CLAIMS AS AMENDED - PART II   |                                       |                                 |              |                               |              |                  | OTHER THAN        |                |                        |                               |                |                        |
|   |                                       | (Column 1)<br>CLAIMS            |              | (Colur                        |              | (Column 3)       | -                 | SMALL E        |                        | OŘ,                           | SMALL          |                        |
| ENT A   |                                       | REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY | PRESENT<br>EXTRA |                   | RATE           | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total                                 | *                               | Minus        | **                            |              | =                |                   | X\$ 9=         |                        | OR                            | X\$18=         |                        |
| AME.  | Independent                           | *                               | Minus        | ***                           |              | =                |                   | X42=           |                        | OR                            | X84=           |                        |
| Ľ   | FIRST PRESE                           | NTATION OF M                    | ULTIPLE DEF  | PENDENT                       | CLAIM        |                  |                   | .140-          |                        | 1                             | +280=          |                        |
|   |                                       |                                 |              |                               |              |                  | L                 | +140=<br>TOTAL |                        | OR                            | TOTAL          |                        |
|   |                                       |                                 |              |                               |              |                  | ΑĐ                | DIT, FEE       | ·                      | OR                            | ADDIT. FEE     |                        |
| l   |                                       | (Column 1)<br>CLAIMS            |              | (Colur                        |              | (Column 3)       |                   |                |                        |                               |                |                        |
| ENT B   |                                       | REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY | PRESENT<br>EXTRA |                   | RATE           | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total                                 | *                               | Minus        | **                            |              | =                |                   | X\$ 9=         |                        | OR                            | X\$18=         |                        |
| A WE  | Independent                           | *                               | Minus        | ***                           | <del></del>  | =                |                   | X42=           |                        | OR                            | X84=           |                        |
| الـــــــــــــــــــــــــــــــــــــ   | FIRST PRESE                           | NTATION OF MI                   | JLTIPLE DEF  | PENDENT                       | CLAIM        |                  | ┢                 | .140           |                        |                               | +280=          |                        |
|   |                                       |                                 |              |                               |              |                  | L                 | +140≃<br>TOTAL |                        | OR                            | +28U=<br>TOTAL |                        |
|   |                                       |                                 |              |                               |              |                  | AD                | DIT. FEE       |                        | OR                            | ADDIT. FEE     |                        |
| <b> </b>  | · · · · · · · · · · · · · · · · · · · | (Column 1)<br>CLAIMS            |              | (Colur                        |              | (Column 3)       |                   |                |                        |                               |                |                        |
| AMENDMENT C   |                                       | REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |                   | RATE           | ADDI-<br>TIONAL<br>FEE |                               | RATE           | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total                                 | *                               | Minus        | **                            |              | =                |                   | X\$ 9=         | _                      | OR                            | X\$18=         |                        |
| AME   | Independent                           | *                               | Minus        | ***                           | T (0) A 19 A | <u> -</u>        |                   | X42=           |                        | OR                            | X84=           |                        |
|   | FIRST PRESE                           | NTATION OF M                    | ULTIPLE DEI  | PENDEN                        | CLAIM        |                  |                   | +140=          |                        |                               | +280=          |                        |
|   |                                       | mn 1 is less than t             |              |                               |              |                  | L                 | TOTAL          |                        | OR                            | TOTAL          |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                       |                                 |              |                               |              |                  |                   |                |                        |                               |                |                        |